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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)		
FY 2009 {Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).}		5976-23-1		
Application Number 10/720,659		Filed November 22, 2005		
For METHOD FOR CREATING AN ARTIFIC	CIAL FACET			
Art Unit 3775		Examiner SWIGER III, James L.		
This is a request under the provisions of 37 CFR 1, application	136(a) to extend the per	iod for filing a reply in t	he above identified	
The requested extension and fee are as follows (cf	neck time period desired	and enter the appropri	ate fee below):	
	Fee	Small Entity Fee	***************************************	
One month (37 CFR 1.17(a)(1))	\$130	\$65	S	
Two months (37 CFR 1.17(a)(2))	\$490	\$245	s	
Three months (37 CFR 1.17(a)(3))	\$1110	\$555	s <u>555</u>	
Four months (37 CFR 1.17(a)(4))	\$1730	\$865	s	
Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$	
Applicant claims small entity status. See 37 Cf	FR 1.27.		***************************************	
A check in the amount of the fee is enclose	ed.		***************************************	
Payment by credit card. Form PTO-2038 is attached.				
The Director has already been authorized to charge fees in this application to a Deposit Account.				
The Director is hereby authorized to charg Deposit Account Number 50-0951	ge any fees which may	be required, or cred	lit any overpayment, to	
WARNING: Information on this form may become Provide credit card information and authorization	public, Credit card inform n on PTO-2038.	nation should not be inc	sluded on this form.	
I am the applicant/inventor.			***************************************	
assignee of record of the er Statement under 37 CFF				
attorney or agent of record. Registration Number 46,665				
attorney or agent under 37 Registration number if acting u	CFR 1.34. Inder 37 CFR 1.34		***************************************	
/Michael K. Dixon/		September 4	September 4, 2009	
Signature		Date		
Michael K. Dixon		(561) 653-5000		
Typed or printed name		Telep	hone Number	
NOTE: Signatures of all the inventors or assignees of record of the signature is required, see below.	e entire interest or their represe	ntative(s) are required. Subm	it multiple forms if more than one	
Total of forms are submitted.				

This collection of information is required by S7 CPR 1.136(ii). The information is required to obtain or retain a benefit by the public which is to file (and by the LISPTO to proces) an application. Confidentiatily is governed by S3 U.S. 122 and S7 CPR 1.13 and 1.14. This collection is estimated to take 6 minutes. Any compress, including glathering, preparing, and sclarifling their compressor application form to the LISPTO. There will vary objecting upon the wild wild calculate. Any commercia on the amount of time you require to complete this form and/or suggestions for naturing this button, should be earl to the Chief Information Chief.

1.5 Falset and Tradication (Sinch LISPTO SINCH PROPERTY COMPUTED). FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1456, Alexandria, VA 22313-1456.